## Case 16-14281-elf Doc 114 Filed 03/21/17 Entered 03/21/17 08:47:43 Desc Main Document Page 1 of 2

Fill in this information to identity			,					
Pohtos 1 Franklin A. Benne	ti III							
Debtor 1 Franklin A. Define	(Hiddle Name	Last Name						
Debtor 2 (Spouse, if filling) Pret Name	Midale Name	Last Name						
United States Bankruptcy Court for the: [	Eastern District of Penn	nsylvania						
Case number 16-14281	The state of the s		Check if this is:					
(If known)			☐ An amended filing					
		_	A supplement showing postpetition chapter 13 income as of the following date:					
Official Form 1061  Schedule 1: You	AMEN	000	MM / DD / YYYY					
Schedule 1: You	rincome	3/2//17		12/15				
supplying correct information. If you fix you are separated and your spou	ou are married and ho se is not filing withly: top of any additional	ot filling jointly, and your spouse i ou, do not include information al	or 1 and Debtor 2), both are equally responsistiving with you, include information about your spouse. If more space is needed e number (if known). Answer every questi	ut your spouse. I, attach a				
Fill in your employment information.		Debtor 1	Debtor 2 or non-filing s	pouse				
If you have more than one job.		A trace of 19 amount with a second of the physical control of	ം - ഗു. നു പ്രേയം വേഗം പത്ത്യാട്ടാവ പരിച്ചത്തിൽ വേദ്യ വസ് ക് പ്രസ്താന വര്യായ പരിയും പരിയുവരുന്ന് എന്ന് <b>കേര് ആവ്യവി ഉത്ത്യക്ക്</b>	ezerek tin - ulan ezerek negelenegek ezekenyen egenegen egenegen ezekelek eze <b>eken</b>				
attach a separate page with information about additional employers.	Employment status		<b>☑</b> Employed □ Not employed					
Include part-time, seasonal, or self-employed work.	or of the state of							
Occupation may include student or homemaker, if it applies.	Occupation	Real Estate/ Law	<u>Paralegal</u>					
	Employer's name	Bennett & Associates,	LLC Bennett & Associates	Bennett & Associates, LLC  4712 Castor Avenue				
	Employer's address	4712 Castor Avenue						
		wumber Street	Mattos: Street					
	in the state of th	Philadelphia PA	19124 Philadelphia PA	19124 ZIP Code				
	How long employed	•	1yrs	- '				
Part 2	Menthly Income							
Estimate monthly income as of spouse unless you are separated.	the date you file this	form. If you have nothing to report	for any line, write 50 in the space. Include yo	ur non-filing				
	ive more than one emp	ployer, combine the information for to this form.	all employers for that person on the lines					
		F	or Debtor 1 For Debtor 2 or non-filling spouse					
List monthly gross wages, salideductions). If not paid monthly,	ary, and commissions calculate what the mor	and a second second	5,900.00 s 3,000.00					
3. Estimate and list monthly over	time pay.	3. +s_	0.00 + s 0.00					
4. Calculate gross income. Add h	ne 2 ± line 3.	4. S_	5,900.00 s_3,000.00					
	1:	h-m-mann						

Case 16-14281-elf Doc 114 Filed 03/21/17 Entered 03/21/17 08:47:43 Desc Main Document Page 2 of 2

Debtor 1	Franklin A. Bennett III Frankline Middle Spane float Name			Case numb	OST of knowed	16-142	21		
	TO AN ARCHITECTURE PROMOTE CARRETTE TO THE STATE OF THE S			For Debto			nor 2 or 19 spouse		
Сор	y line 4 here	,	<b>≱</b> 1.	s5,900	0.00	\$	3.000.00		
5. List	all payroll deductions:								- :
5a.	Tax, Medicare, and Social Security deductions		5a.	s 600	0.00	\$	350.00		
5b.	Mandatory contributions for retirement plans		5b.	s(	0.00	\$			
5c.	Voluntary contributions for retirement plans		5c.	s(	0.00	\$			
5d.	Required repayments of retirement fund loans		5d.	\$(	0.00	5			
5e.	Insurance		5€.	\$(	0.00	\$			
5f.	Domestic support obligations		5f.	ŝ(	0.00	\$			
5g.	Union dues		5g.	s(	0.00	\$			
5h.	Other deductions. Specify: City Tax	,	5h.	+s200	0.00	+ \$	150.00		:
6. <b>A</b> d	d the payroll deductions. Add lines 5a + 5b + 5c	+ 5d + 5e +5f + 5g ÷ 5h.	6.	s800	0.00	\$	500.00		
7. <b>Ca</b>	Iculate total monthly take-home pay. Subtract lin	e 6 from line 4.	7.	s 5,100	00.00	S	2,500.00		
8. List	t all other income regularly received:					ſ			
8a.	Net income from rental property and from ope profession, or farm	rating a business,							
	Attach a statement for each property and busines receipts, ordinary and necessary business expendently net income.		8a.	s		S			
8b	. Interest and dividends		85.	\$		\$			
8c.	Family support payments that you, a non-filing regularly receive	spouse, or a depende	ent						
	Include alimony, spousal support, child support, n settlement, and property settlement.	naintenance, divorce	8c.	\$		\$			
8d.	Unemployment compensation		8d.	\$		\$			
8e	. Social Security	: :	8e.	5		\$	·		
8f.	Other government assistance that you regular include cash assistance and the value (if known) that you receive, such as food stamps (benefits u Nutrition Assistance Program) or housing subsidion Specify:	of any non-cash assistar ider the Supplemental	nce 87.	\$ <u>.</u>		\$			
8a	. Pension or retirement income		8g.	S		ç			
	Other monthly income. Specify:			J		ψ			
	•			+s		+ s		1	
9. Ad	d all other income. Add lines 8a + 8b + 8c + 8d →	8e + 8f +8g + 8h.	9.	\$		S			
	culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or	non-filing spouse.	10.	s_ 5,100	2.60	\$	2,500.00	<b>=</b> \$	7,600.00
	te all other regular contributions to the expense				÷				
frie	ude contributions from an unmarried partner, mem nds or relatives.								
	not include any amounts already included in iines 2	1-10 or amounts that are	not a	vailable to pay	expense	s listed in -	Schedule J. 11.	<b>+</b> \$.	0.00
12. Add the amount in the last column of line 10 to the		amount in line 11. The	resul	is the combin	ned mont	nly incom	e.	Г	7 000 00
Wri	te that amount on the <i>Summary of Your Assets an</i>	l Liabilities and Certain S	Statisti	cal Informatio	n, if it app	iles	12.	C	7,600.00 ombined
Z	you expect an increase or decrease within the No.	year after you file this	form?				The state of the s	111	onany modifie
	Yes. Explain:	:							